

Docket No. 108347-00024 (089.0006)

ARENT FOX PLLC

Declaration For U.S. Patent Application

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

(Insert Title) MIXER CIRCUIT OFFSET COMPENSATION

the specification of which is attached hereto unless the following box is checked:

☒ was filed on _____ As PCT International Application
Number _____ and was amended on _____
and/or was filed on April 16, 2004 As U.S. Patent Application
Number 10/825,601 and was amended on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. '1.56.

I hereby claim foreign priority benefits under 35 U.S.C. '119(a)-(d) or '365(b) of any foreign application(s) for patent or inventor's certificate, or '365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate or PCT International Application having a filing date before that of the application(s) for which priority is claimed:

(List prior foreign applications)	<u>0309043.8</u> (Number)	<u>Great Britain</u> (Country)	<u>22 April 2003</u> (Day/Month/Year Filed)	Priority Claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No
	_____ (Number)	_____ (Country)	_____ (Day/Month/Year Filed)	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under 35 U.S.C. '119(e) of any United States provisional application(s) listed below.

_____ (Application Number)	_____ (Filing Date)
_____ (Application Number)	_____ (Filing Date)

☐ See attached list for additional prior foreign or provisional applications.

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(List prior U.S. Applications or PCT International applications designating the U.S.)	_____ (Application Serial No.)	_____ (Filing Date)	_____ (Status) (patented, pending, abandoned)
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And I hereby appoint the firm of Arent Fox, Customer Number 004372 including as principal attorneys:

Anderson, Lynne D., Reg. No. 46,412
Barton, Rhonda L., Reg. No. 47,271
Berman, Richard J., Reg. No. 39,107
Carlan, Janine, Reg. No. 42,387
Carpenter, Robert K., Reg. No. 34,794
Cherdak, Erik, Reg. No. 39,936
Chessner, Wilburn, Reg. No. 41,668
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Oram, George, E., Jr., Reg. No. 27,931
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Haydoutova, Juliana, Reg. No. 43,313
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Hsu, John, Reg. No. 45,563

Schoenhard, Amy, Reg. No. 46,512
Stahnke, Sarah, Reg. No. 54,854
Wong, King, Reg. No. 37,500

Please direct all communications to the following address:

Customer No. 004372
ARENT FOX PLLC
1050 Connecticut Avenue, N.W., Suite 400
Washington, D.C. 20036-5339
Telephone No. (202) 857-6000; Facsimile No. (202) 638-4810

The undersigned hereby authorizes the U.S. attorneys named herein to accept and follow instructions from the undersigned's assignee, if any, and/or, if the undersigned is not a resident of the United States, the undersigned's domestic attorney, patent attorney or patent agent, as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorneys named herein will be so notified by the undersigned

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor Andrew MORAN

Inventor's signature _____

_____ Date

Residence Wiltshire, United Kingdom

Citizenship British

Post Office Address 12 Mallow Close, Swindon, Wiltshire, United Kingdom

Full name of second inventor

Stephen John PARRY

Inventor's signature _____

_____ Date

Residence Wiltshire, United Kingdom

Citizenship British

Post Office Address 37 Omdurman Street, Swindon, Wiltshire, United Kingdom

Full name of third inventor

Alun Vaughan WATKINS

Inventor's signature _____

28th July '04
Date

Residence Faringdon, United Kingdom

Citizenship British

Post Office Address 27 Harding Close, Faringdon, United Kingdom

Full name of fourth inventor

Inventor's signature _____

_____ Date

Residence _____

Citizenship _____

Post Office Address _____

Full name of fifth inventor

Inventor's signature _____

_____ Date

Residence _____

Citizenship _____

Post Office Address _____

Full name of sixth inventor

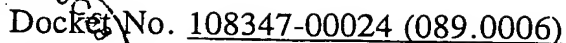
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Inventor's signature _____

01 Aug 2024
Date

Residence Wiltshire, United Kingdom

Citizenship British

Post Office Address 12 Mallow Close, Swindon, Wiltshire, United Kingdom

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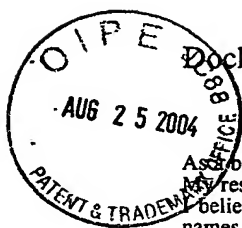
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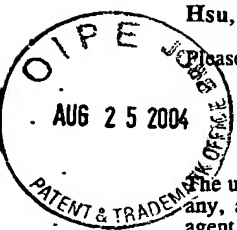
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Date _____

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Full name of second inventor

Stephen John PARRY

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S.J. Parry

20TH JULY 2004

Date _____

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Citizenship British

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51 WHEELER AVENUE,

Full name of third inventor

Alun Vaughan WATKINS

Inventor's signature _____

Date _____

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Citizenship British

Post Office Address 27 Harding Close, Faringdon, United Kingdom

Full name of fourth inventor _____

Inventor's signature _____

Date _____

Residence _____

Citizenship _____

Post Office Address _____

Full name of fifth inventor _____

Inventor's signature _____

Date _____

Residence _____

Citizenship _____

Post Office Address _____

Full name of sixth inventor _____

Inventor's signature _____

Date _____

Residence _____

Citizenship _____

Post Office Address _____